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APPLICANTS

Charles Grant Hedges, Spirit Lake, IA;

 ** CONTINUING DATA ***** *NONE* *****

 ** FOREIGN APPLICATIONS ***** *NONE* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	IA	2	7	2
<i>[Initials]</i> Initials				

ADDRESS

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TITLE

Therapeutic support device

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